

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		8	04/25/01
FORMALITY REVIEW	<i>Intelle</i>	TC 826	6/25/01
RESPONSE FORMALITY REVIEW	<i>Q1</i>	825	10/18/01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	9/02
2	8/12
3	11/03
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16	✓
17	✓
18	✓
19	✓
20	0
21	0
22	0
23	0
24	0
25	0
26	0
27	✓
28	✓
29	✓
30	✓
31	0
32	0
33	0
34	0
35	0
36	✓
37	✓
38	✓
39	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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BEST AVAILABLE COPY

H.S.  
 6-25-01  
 8-25-01  
 10/19/01